Montana Ryan White/ADAP Affidavit of Financial Status

Please explain why you can't provide proof of financial status in the space provided below.

By signing below, I acknowledge that the above self-declaration of financial status is true. I also declare that I do not have any medical insurance (private, Medicaid, HMK, Medicare) that is not indicated on my ADAP application form.

Patient Signature	Date
Print Patient Name	Date of Birth
Case Manager Signature	 Date

Revised 08/09/2018